Practitioner's Docket No. 1932.99C

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Waller, Jr., James K.; Waller, Jon J.; and Blum, Russell W. In reapplication of:

optication No.: 09/362,266 Group No.: 2644

Filed: July 28, 1999 Examiner: XU MEI

MULTI-DIMENSIONAL PROCESSOR AND MULTI-DIMENSIONAL AUDIO PROCESSO

**SYSTEM** 

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**Assistant Commissioner for Patents** Washington, D.C. 20231

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Technology Center 2600

NOTICE OF APPEAL FROM THE PRIMARY EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES (37 C.F.R. section 1.191)

Applicant hereby appeals to the Board from the decision of the Primary Examiner, mailed March 6, 2003, finally rejecting claims 2-5.

STATUS OF APPLICANT 1.

This application is on behalf of a small entity. Applicant claims small entity status.

2. FEE FOR FILING NOTICE OF APPEAL

Pursuant to 37 C.F.R. section 1.17(b), the fee for filing the Appeal Brief is:

Small entity

\$160.00

Notice of Appeal fee due

\$160.00

3. **EXTENSION OF TERM** 

The proceedings herein are for a patent application and the provisions of 37 C.F.R.1.136 apply.

Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.

## CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. 1.8(a))

I hereby certify that, on the date shown below, this correspondence is being:

MAILING

deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

**FACSIMILE** 

transmitted by facsimile to the Patent and

(type or print name of person certifying)

(Notice of Appeal from the Primary Examiner to Board--page 1 of 3)

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## 4. TOTAL FEE DUE

The total fee due is:

Notice of Appeal fee \$160.00

TOTAL FEE DUE \$160.00

## 5. FEE PAYMENT

Attached is a check in the sum of \$160.00. A duplicate of this transmittal is attached.

## **6.** FEE DEFICIENCY

If any additional extension and/or fee is required, this is a request therefor and to charge Account No. 03-1127.

If any additional fee for claims is required, charge Account No. 03-1127.

Date: 3/12/03

Frank J. Catalano Registration No. 25836

Frank J. Catalano, P.C. 810 S. Cincinnati, Suite 405

Tulsa, OK 74119

**USA** 

918-584-8787

Customer No. 07303